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<u></u>								110000308						
1									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO								RD 7780.7790501						
Effective October 1, 2001														
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ENTITY		OTHER			
T	OTAL CLAIMS	11)	(Column 2)			TYPE		OR	SMALL					
L			21					RATE		1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 370.00	OR	BASIC FEE	740.00		
ľ	OTAL CHARGE	ABLE CLAIMS	2./ minus 20=		• • •			X\$ 9=		OR	X\$18=			
IN	DEPENDENT C	LAIMS .	3 minus3=		-			X42=		OR	X84=			
MI	ILTIPLE DEPE	NDENT CLAIM P	RESENT							1				
* If the difference in column 1 is less than zero, enter "0" in column 2							'	+140=		OR	+280=			
								TOTAL	· L	OR	TOTAL			
9-13-01/CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAI	LENTITY	OR	OTHER			
	1	CLAILIS ·		RIGR	E5T	(Column 3)	l (ADDI	֓֞֞֞֞֞֜֞֜֞֞֜֞֜֞֜֞֜֜֞֜֜֜֞֜֜֜֜֜֜֓֓֓֜֜֟֜֜֜֜֜֜֜֝	Sance.	ADDi-		
1		REMAINING AFTER		PREVIO	META	PRESENT EXTRA	.	RATE	TIONAL		RATE	TIONAL		
AMENDMENT A	Total	AMENDMENT	Minus	PAID	FOR /		ŀŀ	***	FEE	1		FEE		
	Independent	• 21	Minus	<u></u>	<u>1</u>			X\$ 9-		OR	X\$18=			
₹								X42=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=			
	·							YOYA		~	TOTAL			
(Column 1) (Column 2) (Column 3)									€ــــــ	Jon	ADDIT, FEE			
	عد امزائم	CLAIMS REMAINING		HIGH	EST		M		ADDI-	1 (ADDI-		
토	000	AFTER AMENDMENT		PREVIO	USLY	PRESENT		RATE	TIONAL	. `	RATE	TIONAL		
AMENDMENT B	Total	. //	Minus		7/	. ()	lt		FEE	1	222	FEE		
	Independent	. 3	Minus	***		. 7	1 1	X2 87	\	OR	X\$148-	-1-		
₹		INTATION OF MI			CLAIM	'. 		X42=		OR	X84=			
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(Column 1) (Column 2) (Column 3)								DOIT. FE			adoit. Fee! \			
0		CLAIMS REMAINING	1 1. 2. 22.	RIGH	EST	PRESENT	Г		ADDI-	1 1	<u>`</u>	ADDI-		
Ę	۸.	AFTER AMENOMENT		PREVIO	USLY	EXTRA		RATE	TIONAL		RATE	TIONAL		
	Total	• AMENDMENT	Minue	**	<u> </u>		ŀ		FEE		Vec	FEE		
AMENDMENT C	Independent	•	Minus	***		-		X\$ 9=		OR	X\$18=			
		NTATION OF MI			CLAIM			·X42=		OR	X84=			
-								+140=		OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "If in column 3. TOTAL ** If the Trighest Number Previously Peid For IN THIS SPACE is less than 20, exter "20."										OR	TOTAL			
"If the Highest Number Previously Paid For IN THIS SPACE is less than 20, enter 72." ADOIT, FEE														
	Area Lefterin Legit	- rienday FL	(mm) a) Marana		- 1444	~ ~ ~ ~ ~	Henderson on	. e: QI	a-141 I.			